## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # **F26995**

1, Corporation Name

PIONEER WATERPROOFING SUPPLY, INC.

						1 <b>818</b> 11 <b>8</b> (815 81811 81	1911 81911 1991
Principal Place of Business Mailing Address							
3451 NW 14TH		3451 NW 14TH AVENUE POMPANO BEACH FL 330	764				
POMPANO BEACH FL 33064 POMPANO BEACH FL		POMPANO DEAGN FL 33	<b>1</b> ,04		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					03/25/1981		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Apr	plied For
21		26			59-2151766	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A Fee Re	
City & State	е	City & State			6. Election Campaign Financing Trust Fund Contribution	<b>\$5.00</b> Added t	•
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current year	Intangible	
24	25	29	30		Personal Property Tax.	☐ Yes	XNo
	9. Name and Address of Curr		1		10. Name and Address of New Registere	d Agent	
				81 Name			*
HERNANDEZ, ROY C. JR.				82 Street Addr	ress (P.O. Box Number is Not Acceptable)		<del> </del>
3451 NW 14TH AVENUE					The results of the control of the co	- 3 4 1 234 1 7 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Arthur Har de anti-
POM	IPANO BEACH 33064			83			<b>流動能</b> 。
				84 City	F	85 Zip (	Code
					poration submits this statement for the purpose		
SIGNATURE	m familiar with, and accept the obli	igent and title if applicable. (NO	TE: Registered		od when reinstating). DATE	AND DIDEOTS	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	Addition
TITLE	VT	☐ DELETE	1.1 TI				
NAME	HERNANDEZ, ROY C. JR.		1.2 N/	ì	•		
STREET ADDRESS			4	TREET ADDRESS	·		
CITY-ST-ZIP	POMPANO BCCH FL			TY-ST-ZIP			
TITLE	PS	☐ DELETE	2.1 T	TIE I			☐ Addition
NAME	HERNANDEZ, DOROTHY	·	L			Change	Addition
STREET ADDRESS		·	2.2 N	AME		Change	☐ Addition
CITY-ST-ZIP		·	2.3 ST	AME TREET ADDRESS		Change	☐ Addition
TITLE	POMPANO BCH. FL		2.3 S1 2.4 C	AME TREET ADDRESS SITY-ST-ZIP			<u>-</u>
NAME	. V mar	□ DELETE	2.3 ST 2.4 C 3.1 Tr	AME TREET ADDRESS CITY-ST-ZIP TLE		☐ Change	☐ Addition
	V HERNANDEZ, ROY I	□ DELETE	2.3 ST 2.4 C 3.1 Tf 3.2 N/	AME TREET ADDRESS EITY-ST-ZIP TLE AME			<u>-</u>
STREET ADDRESS	V HERNANDEZ, ROY I 3451 NW 14 AVE	☐ DELETE	2.3 ST 2.4 C 3.1 TT 3.2 NJ 3.3 ST	AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS			<u>-</u>
CITY-ST-ZIP	V HERNANDEZ, ROY I	_	2.3 ST 2.4 C 3.1 TI 3.2 N 3.3 ST 3.4 C	AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP			<u>-</u>
CITY-ST-ZIP TITLE	V HERNANDEZ, ROY I 3451 NW 14 AVE	☐ DELETE	2.3 \$1 2.4 C 3.1 TI 3.2 NJ 3.3 \$1 3.4 C 4.1 TI	AME TREET ADDRESS CITY-ST-ZIP TLE AME TREET ADDRESS CITY-ST-ZIP TLE		Change	☐ Addition
CITY-ST-ZIP TITLE NAME	V HERNANDEZ, ROY I 3451 NW 14 AVE	_	2.3 S1 2.4 C 3.1 TI 3.2 N/ 3.3 S' 3.4 C 4.1 TI 4.2 N/	AME TREET ADDRESS CITY-ST-ZIP TLE AME TREET ADDRESS CITY-ST-ZIP TLE		Change	☐ Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	V HERNANDEZ, ROY I 3451 NW 14 AVE	_	2.3 S1 2.4 C 3.1 TT 3.2 Nv 3.3 S' 3.4. C 4.1 TT 4.2 N 4.3 S' 4.4 Cl	AME TREET ADDRESS CITY-ST-ZIP TLE AME TREET ADDRESS CITY-ST-ZIP TLE FAME TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS		Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HERNANDEZ, ROY I 3451 NW 14 AVE	☐ DELETE	2.3 S1 2.4 C 3.1 TT 3.2 Nv 3.3 S' 3.4 C 4.1 TT 4. 2 N 4.3 S' 4.4 CI 5.1 TI 5.2 N	AME TREET ADDRESS CITY-ST-ZIP TLE AME TREET ADDRESS CITY-ST-ZIP TLE FAME TREET ADDRESS		☐ Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	V HERNANDEZ, ROY I 3451 NW 14 AVE POMPANO BCH. FL	☐ DELETE	2.3 S1 2.4 C 3.1 TI 3.2 Nv 3.3 S7 3.4 C 4.1 TI 4. 2 N 4.3 S7 4.4 CI 5.1 TI 5.2 N. 5.3 S7	AME TREET ADDRESS CITY-ST-ZIP TLE AME TREET ADDRESS CITY-ST-ZIP TLE FAME TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS		☐ Change	☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 to hanged, or on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

BE AND DOPEN DE PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

☐ DELETE

1/26/99 (954) 943 - 8050 Dayline Phone #

**FILED** 

Feb 11, 1999 8:00am

**Secretary of State** 

02-11-1999 90057 009 \*\*\*158.75

(2E034 (11/98)

Addition